Section 108 Accomplishments Report

	PRO	OJECT DESCRIPT	ION			CDBG \$			ELIGIBLE ACTIVITY		TONAL ECTIVE		J	OBS				HOUSING	6	LMA	LMC	SBA	SBS
Grantee Name	Sī	T Project Number	Project Name	108 Loan Amount	EDI AMT	BEDI AMT	Other CDBG \$s	Total CDBG \$ Assistance	HUD Matrix Code for Eligible Activity	HUD N.O. Matrix Code	Has	FTE Jobs Proposed in 108 Appl.	Total Actual FTE Jobs Created	Number Held by/ Made Available to Low/ Mod	Percent Held by/ Made Available to Low/ Mod	Presumed Low/ Mod Benefit (P) or Rev. Strategy Area (RSA)		Number of Units Occupied by Low/ Mod Household s	Units Occupied by	Percent Low/ Mod in Service Area	е	Slum/ Blight Area Y=Yes	Slum/ Blight Spot Y=Yes
Good Hope Marketplace Limited Partnership	DC	C B-94-MC-11-0001	Good Hope Marketplace Acquisition Loan Guarantee	\$11,500,000	¢ 1 000 000			\$ 12,500,000	18A	LMJ	Y	185	175	148	85%								
Earth Conservation Corps			PEPCO Pumphouse		\$ 1,000,000	\$ 300,000		\$ 600,000	17C	LMA	Y	30	18	15	83%					80%			
TOTALS			_	\$11,800,000	\$ 1,000,000	\$ 300,000	\$ -	\$ 13,100,000				215	193	163	N/A		0	0	N/A	N/A			
Notes: See Attac	ched	Guidance	(1) & (2)						(3)	(4)		(5)	(6)	(7)	(8)	(8)	(9)			(8)			

Federa	Cash T	ransactions R-eport	OMB Approval No. 0348-0003 1. Federal sponsoring agency and organizational element to which this report is submittee Department of Housing and Urban Development				
J V . M		ranagenone it operi					
See Instructi ssistance ag	ions on the bac preement, attac	ck If report is for more than one grant or the completed Standard Form 272-A)					
. Recipient	t Organization		Federal grant or other identification number S-MC-110001	identifying number			
lam e	Departme Developm	ent of Housing and Community	6. Letter of credit number	7. Last payment v			
lumber nd Street	,	n Capitol Street, N.■E.	86-00PP231	<u> </u>	one		
	OUT NOIS	Capitol Street, III.	Give total number to 8. Payment vouchers credited to	for this period 9. Treasury chec	ks received		
	Machinet	- D.C. 20002	your account	(whether or not deposited)			
City, State and Zip Code	wasningi	on, D.C. 20002	None		one		
			10. Period covered				
3. Federal E	imployer ation Number	53-600 1131	From (month, day, year) 10/01/2004	To (month, day, ye 12/31/200	•		
		a. Cash on hand beginnin of reporting period	\$	-29,658.00			
		b. Letter of credit withdraw—als	0.00				
11. Status of	f	c. Treasury check paymer ts	0.00				
Federal Cash		d. Total receipts (Sum of I nes b and c)	0.00				
		e. Total cash available (Sum of lines a and d)	-29,658.0				
(See specific Instruction	nn s	f. Gross disbursements					
on back)	-	g. Federal share of progra mincome	0.00				
		h. Net disbursements (Lin ef minus line g)	0.00				
		i. Adjustments of prior permiods	0.00				
		j. Cash on hand end of period	s	-29,658.00			
	ount shown	13.	Other Information				
represe	ents cash ments for the	a. Interestincome	\$	0.00			
	davs	b. Advances to subgrante es or subcontractors	\$	0.00			

			1			
15.		7	/Δ.	Certification		
I certify to the best of my knowledge and belief that this report is true in all re-	Authorized Certifying Official	Signatur—e	14		Date Report Submitted 01/21/2005	5
spects and that all disburse- ments have been made for the purpose and conditions of the grant agreement.		Typed or printed		and title 3. Dines, Jr. Agency Fisc	Phone (Area code, number, extension all Officer 202-442-7261	•

This space for agency use

Federal Cash	Fransactions Report	OMB Approval No. 0348-0003				
, 040,41,040,1		1. Federal sponsoring agency and organizations	element to which this report is submitted			
	ck If report is for more than one grant or ch completed Standard Form 272-A)	Department of Housing and Urban Development				
2. Recipient Organization		4. Federal grant or other identification number	Recipient's account number or identifying number			
Name Departme	ent of Housing and Community	S-MC-11-00 01	None			
Number Developr	nent	6. Letter of credit number 86-00PP231	7. Last payment voucher number None			
and street 80 1 NOIL	n Capitol Street, N.E.	Give total number for				
Machine	ton DC	Payment vouchers credited to your account	Treasury checks received (whether or not deposited)			
City, State Washing and Zip Code 200 02	ton, DC	None	None			
20002		10. Period covered	· · · · · · · · · · · · · · · · · · ·			
3. Federal Employer Identification Number	53-6001131	From (month, day, year) 01/01/2005	To (month, day, year) 03/31/2005			
	a. Cash on hand beginning of reporting period	\$ -29,658.00				
	b. Letter of credit withdrawals	0.00				
11. Status of	c. Treasury check payments	0.00				
Federa l Cash	d. Total receipts (Sum of lines b and c)	0.00				
_	e. Total cash available (Sum of lines a and d)	-29,658.00				
(Se e specific Instruction s	f. Gross disbursements	0.00				
on back)	g. Federal share of program income	0.00				
	h. Net disbursements (Line f minus line g)	0.00				
	i. Adjustments of prior periods	0.00				
	j. Cash on hand end of period		\$ -29,658.00			
12. The amount shown on Line 11j. above	13.	Other Information	,			
represents cash requirements for the	a. Interestincome		\$ 0.00			
ensuin g da ys	b. Advances to subgrantees or subcontractors		\$ 0.00			

^{14.} Remarks (Attach additional sheets of plain paper if more space is required.)

	<u></u>				
15.			$\Delta \Omega$	Certification	
I certify to the best of my		Signature	1		Date Report Submitted
knowledge and belief that this report is true in all re- spects and that all disburse-	Authorized	199	MA		04/11/2005
ments have been made for	, -	Typed or pri	nted name	and title	Phone (Area code, number, extension)
the purpose and conditions of the grant agreement.	•	Ge	orge B	B. Dines, Jr. Agency Fiscal Officer	202-442-7261

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CEDEDAL OAGE		OMB APPROVAL NO. 0348-0003				
	TRANSACTIONS REPORT	Federal sponsoring agency and organizational element to which this report is submitted				
(See instructions on the back. assistance agreement, attach	If report is for more than one grant or completed Standard Form 272A.)	Department of Housing an	nd Urban Development			
2. RECIPIENT ORGANIZATION	DN .	Federal grant or other identification	5. Recipient's account number or			
DC Donartma	nt of the colonia and on the many	number	identifying number			
Name: UC Departme	nt of Housing and Community Develo	S-MC-110001	None			
Number		6. Letter of credit number	7. Last payment voucher number			
and Street: 801 North Cap	pitol Street, N.E.	86-00P231	None			
City, State Washington	D.C. 00000		number for this period			
and ZIP Code:	, D.C. 20002	Payment Vouchers credited to None	Treasury checks received (whether or not deposited) None			
3. FEDERAL EMPLOYER		10. PERIOD COVERI FROM (month, day, year)	ED BY THIS REPORT			
IDENTIFICATION NO.	> 53-6001131	04/01/2005	TO (month, day, year) 06/30/2005			
	a. Cash on hand beginning of reporting p	a. Cash on hand beginning of reporting period				
	b. Letter of credit withdrawls		152,932.00			
11. STATUS OF	c. Treasury check payments	0.00				
FEDERAL	d. Total receipts (Sum of lines b and c)	152,932.00				
CASH	e. Total cash available (Sum of lines a and	123,274.00				
(See specific	f. Gross disbursements	130,289.00				
instructions on the back)	g. Federal share of program income	0.00				
on the sacty	h. Net disbursements (Line f minus line g)		130,289.00			
	i. Adjustments of prior periods		0.00			
	j. Cash on hand end of period	\$ -7,015.00				
2. THE AMOUNT SHOWN ON LINE 11], ABOVE,	13. OTHER INFORMATION					
REPRESENTS CASH RE- QUIREMENTS FOR THE	a. Interest income		\$			
ENSUING Days	b. Advances to subgrantees or subcontrac	tors	\$			

15.		/// CERIFICATION	
i certify to the best of my knowledge and belief that this report is true in all respects and		SIGNATURE	DATE REPORT SUBMITTED 07/12/2005
that all disbursements have been made for the purpose and conditions of the grant or agreement.	OFFICIAL	George B. Dines, Jr., Agency Fiscal Office	TELEPHONE (Area Code, Number, Extension) (202) 442-7261

		OMB APPROVAL NO. 0348-0003					
FEDERAL CAS	SH TRANSACTIONS REPORT	Federal sponsoring agency and organizational element to which this report is submitted Department of Housing and Urban Development					
	ck. If report is for more than one grant or ch completed Standard Form 272A.)						
2. RECIPIENT ORGANIZA	TION	4. Federal grant or other identification	5. Recipient's account number or				
Name: Department	t of Housing and Community Developm	S-MC-110001	identifying number NONE				
		6. Letter of credit number	7. Last payment voucher number				
Number 801 North 0	Capitol Street, N.E.	86-00P231	NONE				
011 011		Give total n	number for this period				
City, State Washingt and ZIP Code:	on, DC 20002	8. Payment Vouchers credited to your account NONE	Treasury checks received (whether or not deposited) NONE				
		10. PERIOD COVERED BY THIS REPORT					
3. FEDERAL EMPLOYER IDENTIFICATION NO.	► 53-6001131	FROM (month, day, year) 06/01/2005	TO (month, day, year) 09/30/2005				
	a. Cash on hand beginning of reporting	period	\$ -7,015.00				
	b. Letter of credit withdrawls		139,371.00				
11. STATUS OF	c. Treasury check payments	0.00					
FEDERAL	d. Total receipts (Sum of lines b and c)	139,371.00					
CASH	e. Total cash available (Sum of lines a an	132,356.00					
(See specific	f. Gross disbursements	50,890.00					
instructions on the back)	g. Federal share of program income	g. Federal share of program income					
on the backy	h. Net disbursements (Line f minus line g)		50,890.00				
	i. Adjustments of prior periods		152,808.00				
	j. Cash on hand end of period	\$ 234,274.00					
12. THE AMOUNT SHOWN ON LINE 11J, ABOVE		M					
REPRESENTS CASH RE QUIREMENTS FOR THE	a. Interest income		\$				
ENSUING	b. Advances to subgrantees or subcontra	\$					

^{14.} REMARKS (Attach additional sheets of plain paper, if more space is required)

15. CERIFICATION DATE REPORT SUBMITTED I certify to the best of my **AUTHORIZED** knowledge and belief that this 10/13/2005 report is true in all respects and CERTIFYING TYPED OR PRINTED NAME AND TITLE that all disbursements have TELEPHONE (Area Code, been made for the purpose and Number, Extension) George B. Dines, Jr., Agency Fiscal Officer conditions of the grant or OFFICIAL agreement. (202) 442-7261